## **Group 1 Sorting Worksheet**

## **Cultural Responsiveness and Sensitivity; Health Professions Training Program Access**

## STEP 1 – INDIVIDUAL WORK

- Review the recommendations in priority order under "Recommendation" column.
- If you determine that a recommendation has "prerequisites" that are *currently* listed as a lower priority, list that recommendation's number as a "prerequisites."
- If you believe there is more than one prerequisite, please list each prerequisite in proper order.
- Review each recommendation and indicate with an "x" in the appropriate column, whether it has a short-term, medium-term, or long-term completion expectations.
  - Short term- Recommendation that could be completed within 18 months
  - o Medium Term- Recommendation that could be completed within 19 to 36 months
  - o Long Term- Recommendation that will take 36 or more months to complete.

## STEP 2 – SMALL GROUP

- Discuss with your group your thoughts from your individual work. The goal is to understand other group members' thinking.
- After completing a review of additional prerequisites and the timeline, list (by number) the adjusted priority order of recommendations in the far right column.

You also have cards with each recommendation printed on them. As a small group you can move them around in the Adjusted Priority Order the group thinks makes sense in light of the small group discussion.

If you use the cards, list the priority order in the far right column once the group agrees on the order

• IMPORTANT NOTE: To account for the short-term bias inherent in the criterion "Immediate increase to workforce," we recalculated each recommendation's scores. Review the Modified Prioritization by Score sheet to see the changes. This may impact your ranking.

	Recommendation (INDIVIDUAL) STEP 1			(SMALL GROUP) STEP 2		
		Prerequisites	Timeline		e	Adjusted Priority
		List Prerequisites By Their Number	Short	Medium	Long	Order (if applicable)
	Cultural Responsiveness and Sensitivity					
1.	Train foreign-trained health professionals for employment in the United States (e.g. Welcome Back Program)					
2.	Increase institutional commitment and investment in proven programs that increase workforce and diversity					
3.	Increase engagement in cross-cultural opportunities for healthcare organizations and education/training institutions					
4.	Advocate for policy changes to mandate cultural competency training and certification for trainees and new and incumbent health workers					
5.	Mandate cultural competency requirements for postsecondary health related disciplines					
6.	Mandate cultural sensitivity training for health professionals (e.g. Culturally and Linguistically Appropriate Service Standards)					
7.	Add cultural diversity courses and provide continuing education units for cultural competency trainings					
8.	Integrate cultural sensitivity and responsiveness into training program climate, teaching, and skill development					
9.	Develop cultural competency training for primary, secondary, and post-secondary education and training institutions					

Recommendation	(INDIVIDUAL) STEP 1			(SMALL GROUP) STEP 2	
	Prerequisites Timeline		9	Adjusted Priority	
	List Prerequisites By Their Number	Short	Medium	Long	Order (if applicable)
Strengthen and promote an evidenced based business case for sustaining and expanding employer health workforce diversity programs and investing in pipeline efforts					
11. Mandate cultural awareness education for primary and secondary institutions					
12. Ensure alignment between the current healthcare workforce and the diversity of the service population					
13. Develop measurable matrix for defining success related to diversity in professions in relation to community demographics					
14. Develop governing boards that are reflective of regional cultural and linguistic diversity					
15. Provide primary education foreign language courses					
Health Professions Training Program Access					
Increase support and training opportunities for recent graduates and incumbent workers including state and federal policy changes to further develop their skills					
Given a lack of access to education and training opportunities due to the location of education institutions and California's vast geography:	_				
<ul> <li>a. Assess current program capacity and geographic distribution to establish baseline relative to current and projected needs</li> </ul>					

Recommendation	(INDIVIDUAL) STEP 1				(SMALL GROUP) STEP 2	
		Prerequisites	equisites Timeline			Adjusted Priority
		List Prerequisites By Their Number	Short	Medium	Long	Order (if applicable)
Given a lack of access to education and training oppor due to the location of education institutions and Califo geography:						
b. Utilize more technology-assisted education meet needs by increasing reach and access						
3. Offer new or expanded education and training progra self-supporting strategies and partnerships, such as fe programs and courses	•					
Increase education personnel including preceptors, fa mentors, and trainers to support education and training	-					
5. Expand and institutionalize the effective use of "holist review in admissions. Provide less weight to standardi scores and GPA and more weight to distance traveled work experience, communication skills and commitme community service	ized test , graduate					
6. Advocate for policy changes that provide funding to surfacilities offering on-site training; retroactive and proatraining; and organizational reimbursement for health organizations that provide training opportunities	active					
7. Establish programs with specific primary care and diverse Locate more in underserved communities and in outprocommunity settings						
8. Increase non-profit hospital and health plan investme engagement in the pipeline with attention to regional needs based on community benefit principles						

Recommendation	(INDIVIDUAL) STEP 1			(SMALL GROUP) STEP 2	
	Prerequisites	Timeline		e	Adjusted Priority
	List Prerequisites By Their Number	Short	Medium	Long	Order (if applicable)
9. Evaluate opportunity for expansion and build support for replication of model programs such as the UCLA International Medical Graduate (IMG) program, UC Program in Medical Education (PRIME), and post baccalaureate programs					
10. Increase access to health professions education for underserved populations					
11. Advocate for policy changes to allow utilization of associate degree level professionals for teaching					
12. Invest in leadership opportunities for trainees in health related fields of study					
Notes:					

-	Each table to identify a scribe to capture the information discussed.				
-	Each table to identify a facilitator/spokesperson for the group.				
-	In the space below, document the key findings from your discussion for the spokesperson to use during the large group report out.				
	Sorting Report Out				
	Instructions and Note Sheet				
	Table Spokesperson:				
	What were the major themes, findings, adjustments to the recommendations?				
	What questions arose?				
	What clarification is needed?				
	What assumptions were critical components of your review?				
	Trial assamptions train and compensation your review.				
	What additional priorities need to be considered in the future?				
	what additional phonics need to be considered in the luttine:				